

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: **01I40826**

Document Type: **Invoice**

Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
6505201A	2	
022579	1	

(TH) Transaction History

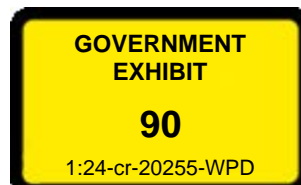
Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/06/21 85312	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/06/21 85312
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 2775	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 2775
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211389	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/08/21 RC#016348
SOLD TO: Name: LEGEND DRUGS 1 LLC Address: 159 E GUNHILL ROAD BRONX NY 10467 Date Purchased & Ref : 01/08/21 01S37028001	SHIPPED TO: Name: LEGEND DRUGS 1 LLC Address: 159 E GUNHILL ROAD BRONX NY 10467 Date Received & Ref : 01/08/21 01S37028001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019291

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA TAB 30CT,

200/25/300 MG

NDC: 61958-1101-01

Reference Number: **01I41012**

Document Type: **Invoice**

Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
019427	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: PILGRIM PHARMACY Address: 2941 WESTCHESTER AVE BRONX NY 10461 Date Purchased & Ref : 01/12/21 01S36787003	SHIPPED TO: Name: PILGRIM PHARMACY Address: 2941 WESTCHESTER AVE BRONX NY 10461 Date Received & Ref : 01/12/21 01S36787003
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: 01I40989

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
022033	1	
019815	1	
019817	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: PILGRIM PHARMACY Address: 2941 WESTCHESTER AVE BRONX NY 10461 Date Purchased & Ref : 01/12/21 01S37136002	SHIPPED TO: Name: PILGRIM PHARMACY Address: 2941 WESTCHESTER AVE BRONX NY 10461 Date Received & Ref : 01/12/21 01S37136002
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: 01I41118

Document Type: Invoice

Reference Date: 01/14/21

Lot Number	Quantity	Unique Serial #
CCZWXB	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: VILLAGE DRUGS INC Address: 1201 SYCAMORE AVENUE #110 TRINTON FALLS NJ 07724 Date Purchased & Ref : 01/14/21 01S37431001	SHIPPED TO: Name: VILLAGE DRUGS INC Address: 1201 SYCAMORE AVENUE #110 TINTON FALLS NJ 07724 Date Received & Ref : 01/14/21 01S37431001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: 01I41119

Document Type: Invoice

Reference Date: 01/14/21

Lot Number	Quantity	Unique Serial #
019815	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: VALUABLE DRUGS Address: 417 TARRYTOWN RD WHITE PLAINS NY 10607 Date Purchased & Ref : 01/14/21 01S37428001	SHIPPED TO: Name: VALUABLE DRUGS Address: 417 TARRYTOWN RD WHITE PLAINS NY 10607 Date Received & Ref : 01/14/21 01S37428001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: **01I41183**

Document Type: **Invoice**

Reference Date: **01/15/21**

Lot Number	Quantity	Unique Serial #
021601	2	
021089	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: ANSONIA PHARMACY Address: 446 6TH AVENUE NEW YORK NY 10011 Date Purchased & Ref : 01/15/21 01S37492001	SHIPPED TO: Name: ANSONIA PHARMACY Address: 446 6TH AVENUE NEW YORK NY 10011 Date Received & Ref : 01/15/21 01S37492001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: 01141240

Document Type: Invoice

Reference Date: 01/15/21

Lot Number	Quantity	Unique Serial #
6425303A	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: MS PHARMACY LLC Address: 201 NEW BRUNSWICK AVE PERTH AMBOY NJ 08861 Date Purchased & Ref : 01/15/21 01S37559001	SHIPPED TO: Name: MS PHARMACY LLC Address: 201 NEW BRUNSWICK AVE PERTH AMBOY NJ 08861 Date Received & Ref : 01/15/21 01S37559001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: **01I41262**

Document Type: **Invoice**

Reference Date: **01/15/21**

Lot Number	Quantity	Unique Serial #
021353	4	
022080	2	
CDPYTA	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO:

Name: **DROGUERIA BETANCES**

Address: **LUIS MUNOZ MARIN AVE**

CAGUAS PR 00725

Date Purchased & Ref : **01/05/21 114524**

SHIPPED TO:

Name: **DROGUERIA BETANCES**

Address: **LUIS MUNOZ MARIN AVE**

CAGUAS PR 00725

Date Received & Ref : **01/05/21 114524**

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref : **01/08/21 85339**

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref : **01/08/21 85339**

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/12/21 PO#01211444**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/12/21 RC#016442**

SOLD TO:

Name: **PROSPERITY PHARMACY MANASSAS**

Address: **8644 SUDLEY ROAD #120**

MANASSAS VA 20110

Date Purchased & Ref : **01/15/21 01S37570001**

SHIPPED TO:

Name: **PROSPERITY PHARMACY MANASSAS**

Address: **8644 SUDLEY ROAD #120**

MANASSAS VA 20110

Date Received & Ref : **01/15/21 01S37570001**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Reference Number: **01I41262**

Document Type: **Invoice**

Reference Date: **01/15/21**

Lot Number	Quantity	Unique Serial #
021354	2	
6468402A	2	
CDPYTB	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750**

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/15/21 01S37570001	SHIPPED TO: Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/15/21 01S37570001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41262**Document Type: **Invoice**Reference Date: **01/15/21**

Lot Number	Quantity	Unique Serial #
022076	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **PROSPERITY PHARMACY MANASSAS**Address: **8644 SUDLEY ROAD #120****MANASSAS VA 20110**Date Purchased & Ref : **01/15/21 01S37570001****SHIPPED TO:**Name: **PROSPERITY PHARMACY MANASSAS**Address: **8644 SUDLEY ROAD #120****MANASSAS VA 20110**Date Received & Ref : **01/15/21 01S37570001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: DESCOVY TAB 30CT, 200/25MG NDC: 61958-2002-01			Reference Number: <u>01I41274</u> Document Type: <u>Invoice</u> Reference Date: <u>01/18/21</u>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Lot Number</th> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Unique Serial #</th> </tr> </thead> <tbody> <tr> <td>021353</td> <td>1</td> <td></td> </tr> <tr> <td>022078</td> <td>2</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Lot Number	Quantity	Unique Serial #	021353	1		022078	2						
Lot Number	Quantity	Unique Serial #												
021353	1													
022078	2													

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC
Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref : 01/05/21 114524	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 01/05/21 114524
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref : 01/08/21 85339	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref : 01/08/21 85339
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/18/21 01S37578001	SHIPPED TO: Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/18/21 01S37578001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41291**Document Type: **Invoice**Reference Date: **01/18/21**

Lot Number	Quantity	Unique Serial #
022078	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **DRUGSMART PHARMACY**Address: **300 MAIN STREET****KEANSBURG NJ 07734**Date Purchased & Ref : **01/18/21 01S37589001****SHIPPED TO:**Name: **DRUGSMART PHARMACY**Address: **300 MAIN STREET****KEANSBURG NJ 07734**Date Received & Ref : **01/18/21 01S37589001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41316**Document Type: **Invoice**Reference Date: **01/18/21**

Lot Number	Quantity	Unique Serial #
022078	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **DRUG MART PHARMACY**Address: **1249 W. 7TH STREET****SOUTH PLAINFIELD NJ 07080**Date Purchased & Ref : **01/18/21 01S37622001****SHIPPED TO:**Name: **DRUG MART PHARMACY**Address: **1249 W. 7TH STREET****SOUTH PLAINFIELD NJ 07080**Date Received & Ref : **01/18/21 01S37622001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41333**Document Type: **Invoice**Reference Date: **01/18/21**

Lot Number	Quantity	Unique Serial #
022078	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GL PHARMACY HOLDINGS LLC**Address: **343 BROADWAY****BROOKLYN NY 11211**Date Purchased & Ref : **01/18/21 01S37634001****SHIPPED TO:**Name: **GL PHARMACY HOLDING LLC**Address: **343 BROADWAY****BROOKLYN NY 11211**Date Received & Ref : **01/18/21 01S37634001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41336**Document Type: **Invoice**Reference Date: **01/18/21**

Lot Number	Quantity	Unique Serial #
022082	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **PHARMAQUICK LLC**Address: **753 ARTHUR GODFREY RD****MIAMI BEACH FL 33140**Date Purchased & Ref : **01/18/21 01S37641001****SHIPPED TO:**Name: **PHARMAQUICK LLC**Address: **753 ARTHUR GODFREY RD****MIAMI BEACH FL 33140**Date Received & Ref : **01/18/21 01S37641001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41368**Document Type: **Invoice**Reference Date: **01/19/21**

Lot Number	Quantity	Unique Serial #
022082	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **VLS PHARMACY INC**Address: **4402 5TH AVE****BROOKLYN NY 11220**Date Purchased & Ref : **01/19/21 01S37652001****SHIPPED TO:**Name: **VLS PHARMACY**Address: **4402 5TH AVE****BROOKLYN NY 11220**Date Received & Ref : **01/19/21 01S37652001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

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(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41370**Document Type: **Invoice**Reference Date: **01/19/21**

Lot Number	Quantity	Unique Serial #
022082	1	
022079	4	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **DUPONT CIRCLE PHARMACY**Address: **1506 21 STREET NW****WASHINGTON DC 20036**Date Purchased & Ref : **01/19/21 01S37662001****SHIPPED TO:**Name: **DUPONT CIRCLE PHARMACY**Address: **1506 21 STREET NW****WASHINGTON DC 20036**Date Received & Ref : **01/19/21 01S37662001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41400**Document Type: **Invoice**Reference Date: **01/19/21**

Lot Number	Quantity	Unique Serial #
022079	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GL PHARMACY HOLDINGS LLC**Address: **343 BROADWAY****BROOKLYN NY 11211**Date Purchased & Ref : **01/19/21 01S37696001****SHIPPED TO:**Name: **GL PHARMACY HOLDING LLC**Address: **343 BROADWAY****BROOKLYN NY 11211**Date Received & Ref : **01/19/21 01S37696001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41401**Document Type: **Invoice**Reference Date: **01/19/21**

Lot Number	Quantity	Unique Serial #
6505201A	1	
022079	1	
CDPYSA	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **JOSEF'S PHARMACY - RALEIGH**Address: **2100 NEW BERN AVE****RALEIGH NC 27610**Date Purchased & Ref : **01/19/21 01S37704001****SHIPPED TO:**Name: **JOSEF'S PHARMACY**Address: **2100 NEW BERN AVE****RALEIGH NC 27610**Date Received & Ref : **01/19/21 01S37704001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41401**Document Type: **Invoice**Reference Date: **01/19/21**

Lot Number	Quantity	Unique Serial #
022576	3	
022077	1	
022073	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **JOSEF'S PHARMACY - RALEIGH**Address: **2100 NEW BERN AVE****RALEIGH NC 27610**Date Purchased & Ref : **01/19/21 01S37704001****SHIPPED TO:**Name: **JOSEF'S PHARMACY**Address: **2100 NEW BERN AVE****RALEIGH NC 27610**Date Received & Ref : **01/19/21 01S37704001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

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(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41438**Document Type: **Invoice**Reference Date: **01/20/21**

Lot Number	Quantity	Unique Serial #
6505201A	3	
6505202A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **CIENEGA PHARMACY**Address: **7360 SANTA MONICA BLVD #101****WEST HOLLYWOOD CA 90046**Date Purchased & Ref : **01/20/21 01S37730001****SHIPPED TO:**Name: **CIENEGA PHARMACY**Address: **7360 SANTA MONICA BLVD #101****WEST HOLLYWOOD CA 90046**Date Received & Ref : **01/20/21 01S37730001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41439**Document Type: **Invoice**Reference Date: **01/20/21**

Lot Number	Quantity	Unique Serial #
6505202A	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **TOTAL CARE PHARMACY**Address: **4531 THIRD AVENUE****BRONX NY 10458**Date Purchased & Ref : **01/20/21 01S37741001****SHIPPED TO:**Name: **TOTAL CARE PHARMACY**Address: **4531 THIRD AVENUE****BRONX NY 10458**Date Received & Ref : **01/20/21 01S37741001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41506**Document Type: **Invoice**Reference Date: **01/20/21**

Lot Number	Quantity	Unique Serial #
6505202A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/20/21 01S37810001****SHIPPED TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/20/21 01S37810001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41660**Document Type: **Invoice**Reference Date: **01/22/21**

Lot Number	Quantity	Unique Serial #
022579	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **PHARMACY EXPRESS**Address: **1081 RUTLAND ROAD****BROOKLYN NY 11212**Date Purchased & Ref : **01/22/21 01S37873001****SHIPPED TO:**Name: **PHARMACY EXPRESS**Address: **1081 RUTLAND ROAD****BROOKLYN NY 11212**Date Received & Ref : **01/22/21 01S37873001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41680**Document Type: **Invoice**Reference Date: **01/22/21**

Lot Number	Quantity	Unique Serial #
022579	3	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ABACUS PHARMACY INC**Address: **168 2ND AVENUE****NEW YORK NY 10003**Date Purchased & Ref : **01/22/21 01S37915001****SHIPPED TO:**Name: **ABACUS PHARMACY INC**Address: **168 2ND AVENUE****NEW YORK NY 10003**Date Received & Ref : **01/22/21 01S37915001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41714**Document Type: **Invoice**Reference Date: **01/22/21**

Lot Number	Quantity	Unique Serial #
6485402A	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **COLE'S VILLAGE PHARMACY**Address: **223 E 3RD STREET****CORONA CA 92879**Date Purchased & Ref : **01/22/21 01S37952001****SHIPPED TO:**Name: **COLE'S VILLAGE PHARMACY**Address: **223 E 3RD STREET****CORONA CA 92879**Date Received & Ref : **01/22/21 01S37952001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41723**Document Type: **Invoice**Reference Date: **01/25/21**

Lot Number	Quantity	Unique Serial #
6485402A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/25/21 01S37962001****SHIPPED TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/25/21 01S37962001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41727**Document Type: **Invoice**Reference Date: **01/25/21**

Lot Number	Quantity	Unique Serial #
6485402A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **AROGYA PHARMACY**Address: **5470 GRATIOT RD****SAGINAW MI 48638**Date Purchased & Ref : **01/25/21 01S37960001****SHIPPED TO:**Name: **AROGYA PHARMACY**Address: **5470 GRATIOT ROAD****SAGINAW MI 48638**Date Received & Ref : **01/25/21 01S37960001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41737**Document Type: **Invoice**Reference Date: **01/25/21**

Lot Number	Quantity	Unique Serial #
6485402A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/25/21 01S37983001****SHIPPED TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/25/21 01S37983001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01141749**Document Type: **Invoice**Reference Date: **01/25/21**

Lot Number	Quantity	Unique Serial #
022577	12	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ADEE PHARMACY INC.**Address: **1427 E GUN HILL RD****BRONX NY 10469**Date Purchased & Ref : **01/25/21 01S37987001****SHIPPED TO:**Name: **ADEE PHARMACY INC.**Address: **1427 E GUN HILL RD****BRONX NY 10469**Date Received & Ref : **01/25/21 01S37987001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41758**Document Type: **Invoice**Reference Date: **01/25/21**

Lot Number	Quantity	Unique Serial #
6485403A	3	
022577	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ANSONIA PHARMACY**Address: **446 6TH AVENUE****NEW YORK NY 10011**Date Purchased & Ref : **01/25/21 01S37990001****SHIPPED TO:**Name: **ANSONIA PHARMACY**Address: **446 6TH AVENUE****NEW YORK NY 10011**Date Received & Ref : **01/25/21 01S37990001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41832**Document Type: **Invoice**Reference Date: **01/26/21**

Lot Number	Quantity	Unique Serial #
6485403A	5	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **LEROY PHARMACY II**Address: **245 EAST 198TH ST****BRONX NY 10458**Date Purchased & Ref : **01/26/21 01S38032001****SHIPPED TO:**Name: **LEROY PHARMACY II**Address: **239 EAST 198TH ST****BRONX NY 10458**Date Received & Ref : **01/26/21 01S38032001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41872**Document Type: **Invoice**Reference Date: **01/26/21**

Lot Number	Quantity	Unique Serial #
6485403A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **BAYSHORE HOMECARE PHARMACY**Address: **733 N BEERS STREET****HOLMDEL NJ 07733**Date Purchased & Ref : **01/26/21 01S38055001****SHIPPED TO:**Name: **BAYSHORE HOMECARE PHARMACY**Address: **733 N BEERS STREET****HOLMDEL NJ 07733**Date Received & Ref : **01/26/21 01S38055001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41876**Document Type: **Invoice**Reference Date: **01/26/21**

Lot Number	Quantity	Unique Serial #
6485403A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **PHILLIPS PHARMACY AND WELLNESS CTR**Address: **2323 NW 19TH ST STE 6****FT LAUDERDALE FL 33311**Date Purchased & Ref : **01/26/21 01S38091001****SHIPPED TO:**Name: **PHILLIPS PHARMACY AND WELLNESS CTR**Address: **2323 NW 19TH ST STE 6****FT LAUDERDALE FL 33311**Date Received & Ref : **01/26/21 01S38091001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41905**Document Type: **Invoice**Reference Date: **01/26/21**

Lot Number	Quantity	Unique Serial #
6485403A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/26/21 01S38111001****SHIPPED TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/26/21 01S38111001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I41915**Document Type: **Invoice**Reference Date: **01/27/21**

Lot Number	Quantity	Unique Serial #
6485403A	8	
022583	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **LEROY PHARMACY**Address: **314 EAST 204TH ST****BRONX NY 10467**Date Purchased & Ref : **01/27/21 01S38120001****SHIPPED TO:**Name: **LEROY PHARMACY**Address: **314 EAST 204TH ST****BRONX NY 10467**Date Received & Ref : **01/27/21 01S38120001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019292**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: 01Document Type: InvoiceReference Date: 01/13/21

Lot Number	Quantity	Unique Serial #

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **BAY PHARMACY 19 INC**Address: **7306 AUSTIN STREET****FOREST HILLS NY 11375**Date Purchased & Ref : **01/13/21 01S37363001****SHIPPED TO:**Name: **BAY PHARMACY 19 INC**Address: **7306 AUSTIN STREET****FOREST HILLS NY 11375**Date Received & Ref : **01/13/21 01S37363001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40826**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
6505201A	2	
022579	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **LEGEND DRUGS 1 LLC**Address: **159 E GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/08/21 01S37028001****SHIPPED TO:**Name: **LEGEND DRUGS 1 LLC**Address: **159 E GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/08/21 01S37028001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40828**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
022080	1	
CDPYZA	1	
CDPYTA	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **KINGS SUPER PHARMACY**Address: **357 FLATBUSH AVE****BROOKLYN NY 11238**Date Purchased & Ref : **01/08/21 01S36829002****SHIPPED TO:**Name: **KINGS SUPER PHARMACY**Address: **357 FLATBUSH AVE****BROOKLYN NY 11238**Date Received & Ref : **01/08/21 01S36829002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40828**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
022078	1	
6468402A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **KINGS SUPER PHARMACY**Address: **357 FLATBUSH AVE****BROOKLYN NY 11238**Date Purchased & Ref : **01/08/21 01S36829002****SHIPPED TO:**Name: **KINGS SUPER PHARMACY**Address: **357 FLATBUSH AVE****BROOKLYN NY 11238**Date Received & Ref : **01/08/21 01S36829002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40835**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
022080	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **COMMUNITY CARE PHARMACY**Address: **2913 SURF AVE****BROOKLYN NY 11224**Date Purchased & Ref : **01/08/21 01S36862001****SHIPPED TO:**Name: **COMMUNITY CARE PHARMACY**Address: **2913 SURF AVE****BROOKLYN NY 11224**Date Received & Ref : **01/08/21 01S36862001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40840**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
022579	1	
6485402A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **LEROY PHARMACY II**Address: **245 EAST 198TH ST****BRONX NY 10458**Date Purchased & Ref : **01/08/21 01S36871002****SHIPPED TO:**Name: **LEROY PHARMACY II**Address: **239 EAST 198TH ST****BRONX NY 10458**Date Received & Ref : **01/08/21 01S36871002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40846**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
019698	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **ELM DRUGS**Address: **56 7TH AVENUE****NEW YORK NY 10011**Date Purchased & Ref : **01/08/21 01S36818002****SHIPPED TO:**Name: **ELM DRUGS**Address: **56 7TH AVENUE****NEW YORK NY 10011**Date Received & Ref : **01/08/21 01S36818002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40856**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
6485403A	1	
6505201A	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Purchased & Ref : **01/08/21 01S37129001****SHIPPED TO:**Name: **ASM DRUGS INC**Address: **55 A EAST GUNHILL ROAD****BRONX NY 10467**Date Received & Ref : **01/08/21 01S37129001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40857**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
6485403A	3	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **VLS PHARMACY INC**Address: **4402 5TH AVE****BROOKLYN NY 11220**Date Purchased & Ref : **01/08/21 01S37131001****SHIPPED TO:**Name: **VLS PHARMACY**Address: **4402 5TH AVE****BROOKLYN NY 11220**Date Received & Ref : **01/08/21 01S37131001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019195**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,**200/25MG****NDC: 61958-2002-01**Reference Number: **01I40874**Document Type: **Invoice**Reference Date: **01/11/21**

Lot Number	Quantity	Unique Serial #
022577	7	
022583	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/06/21 85312****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/06/21 85312****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 2775****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 2775****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **PILGRIM PHARMACY**Address: **2941 WESTCHESTER AVE****BRONX NY 10461**Date Purchased & Ref : **01/11/21 01S37136001****SHIPPED TO:**Name: **PILGRIM PHARMACY**Address: **2941 WESTCHESTER AVE****BRONX NY 10461**Date Received & Ref : **01/11/21 01S37136001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01140824**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
020476	1	
022059	1	
024554	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Purchased & Ref :

SHIPPED TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Received & Ref :

SOLD TO:Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **NORWOOD PHARMACY**Address: **2490 FREDERICK DOUGLAS BLVD.****NEW YORK NY 10030**Date Purchased & Ref : **01/08/21 01S36762001****SHIPPED TO:**Name: **NORWOOD PHARMACY**Address: **2490 FREDERICK DOUGLAS BLVD.****NEW YORK NY 10030**Date Received & Ref : **01/08/21 01S36762001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I40824**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
021358	2	
19GV021UA	1	
020717	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Purchased & Ref :

SHIPPED TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Received & Ref :

SOLD TO:Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **NORWOOD PHARMACY**Address: **2490 FREDERICK DOUGLAS BLVD.****NEW YORK NY 10030**Date Purchased & Ref : **01/08/21 01S36762001****SHIPPED TO:**Name: **NORWOOD PHARMACY**Address: **2490 FREDERICK DOUGLAS BLVD.****NEW YORK NY 10030**Date Received & Ref : **01/08/21 01S36762001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: GENVOYA TAB 30CT, 150/150/200/10MG NDC: 61958-1901-01			Reference Number: <u>01I40824</u> Document Type: <u>Invoice</u> Reference Date: <u>01/08/21</u>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Lot Number</th> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Unique Serial #</th> </tr> </thead> <tbody> <tr> <td>021360</td> <td>1</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Lot Number	Quantity	Unique Serial #	021360	1									
Lot Number	Quantity	Unique Serial #												
021360	1													

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES
Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211389	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/08/21 RC#016348
SOLD TO: Name: NORWOOD PHARMACY Address: 2490 FREDERICK DOUGLAS BLVD. NEW YORK NY 10030 Date Purchased & Ref : 01/08/21 01S36762001	SHIPPED TO: Name: NORWOOD PHARMACY Address: 2490 FREDERICK DOUGLAS BLVD. NEW YORK NY 10030 Date Received & Ref : 01/08/21 01S36762001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I40836**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
20GV007UA	3	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Purchased & Ref :

SHIPPED TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Received & Ref :

SOLD TO:Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Purchased & Ref : **01/08/21 01S36854001****SHIPPED TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Received & Ref : **01/08/21 01S36854001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: GENVOYA TAB 30CT, 150/150/200/10MG NDC: 61958-1901-01			Reference Number: <u>01I40846</u> Document Type: <u>Invoice</u> Reference Date: <u>01/08/21</u>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Lot Number</th> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Unique Serial #</th> </tr> </thead> <tbody> <tr> <td>20GV007UA</td> <td>6</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Lot Number	Quantity	Unique Serial #	20GV007UA	6									
Lot Number	Quantity	Unique Serial #												
20GV007UA	6													

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES
Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211389	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/08/21 RC#016348
SOLD TO: Name: ELM DRUGS Address: 56 7TH AVENUE NEW YORK NY 10011 Date Purchased & Ref : 01/08/21 01S36818002	SHIPPED TO: Name: ELM DRUGS Address: 56 7TH AVENUE NEW YORK NY 10011 Date Received & Ref : 01/08/21 01S36818002
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I40851**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
20GV008UA	2	
20GV007UA	4	
021359	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Purchased & Ref :

SHIPPED TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Received & Ref :

SOLD TO:Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **BROOKLYN CENTER PHARMACY**Address: **104 DEKALB AVENUE****BROOKLYN NY 11201**Date Purchased & Ref : **01/08/21 01S36788001****SHIPPED TO:**Name: **BROOKLYN CENTER PHARMACY**Address: **104 DEKALB AVENUE****BROOKLYN NY 11201**Date Received & Ref : **01/08/21 01S36788001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019196**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I40851**Document Type: **Invoice**Reference Date: **01/08/21**

Lot Number	Quantity	Unique Serial #
20GV006UA	3	
20GV005UA	4	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Purchased & Ref :

SHIPPED TO:Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**

Date Received & Ref :

SOLD TO:Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/07/21 PO#01211389****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016348****SOLD TO:**Name: **BROOKLYN CENTER PHARMACY**Address: **104 DEKALB AVENUE****BROOKLYN NY 11201**Date Purchased & Ref : **01/08/21 01S36788001****SHIPPED TO:**Name: **BROOKLYN CENTER PHARMACY**Address: **104 DEKALB AVENUE****BROOKLYN NY 11201**Date Received & Ref : **01/08/21 01S36788001****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,
150/150/200/10MG
NDC: 61958-1901-01

Reference Number: 01140985

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CFCMFA	4	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725

Date Purchased & Ref : 01/05/21 114524

SHIPPED TO:Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725

Date Received & Ref : 01/05/21 114524

SOLD TO:Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Purchased & Ref : 01/08/21 85339

SHIPPED TO:Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Received & Ref : 01/08/21 85339

SOLD TO:Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Purchased & Ref : 01/12/21 PO#01211444

SHIPPED TO:Name: SAFE CHAIN SOLUTIONS
Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Received & Ref : 01/12/21 RC#016442

SOLD TO:Name: LEGEND DRUGS 1 LLC
Address: 159 E GUNHILL ROAD
BRONX NY 10467

Date Purchased & Ref : 01/12/21 01S37028002

SHIPPED TO:Name: LEGEND DRUGS 1 LLC
Address: 159 E GUNHILL ROAD
BRONX NY 10467

Date Received & Ref : 01/12/21 01S37028002

SOLD TO:Name:
Address:

Date Purchased & Ref :

SHIPPED TO:Name:
Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,
150/150/200/10MG
NDC: 61958-1901-01

Reference Number: 01140994

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CFCMFA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725

Date Purchased & Ref : 01/05/21 114524

SHIPPED TO:Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725

Date Received & Ref : 01/05/21 114524

SOLD TO:Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Purchased & Ref : 01/08/21 85339

SHIPPED TO:Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Received & Ref : 01/08/21 85339

SOLD TO:Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Purchased & Ref : 01/12/21 PO#01211444

SHIPPED TO:Name: SAFE CHAIN SOLUTIONS
Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Received & Ref : 01/12/21 RC#016442

SOLD TO:Name: ANSONIA PHARMACY
Address: 446 6TH AVENUE
NEW YORK NY 10011

Date Purchased & Ref : 01/12/21 01S36899002

SHIPPED TO:Name: ANSONIA PHARMACY
Address: 446 6TH AVENUE
NEW YORK NY 10011

Date Received & Ref : 01/12/21 01S36899002

SOLD TO:Name:
Address:

Date Purchased & Ref :

SHIPPED TO:Name:
Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41000**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
020716	2	
022714	3	
020715	2	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Purchased & Ref : **01/12/21 01S36897002****SHIPPED TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Received & Ref : **01/12/21 01S36897002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41000**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
021361	4	
022060	2	
CFCMCA	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Purchased & Ref : **01/12/21 01S36897002****SHIPPED TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Received & Ref : **01/12/21 01S36897002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41000**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
021360	1	
20GV006UA	2	
022059	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Purchased & Ref : **01/12/21 01S36897002****SHIPPED TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Received & Ref : **01/12/21 01S36897002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41000**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
021358	2	
20GV007UA	1	
CFCMDA	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Purchased & Ref : **01/12/21 01S36897002****SHIPPED TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Received & Ref : **01/12/21 01S36897002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41000**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
20GV008UA	1	
20GV005UA	1	
021357	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Purchased & Ref : **01/12/21 01S36897002****SHIPPED TO:**Name: **GARDEN GROVE COMMUNITY PHARMACY**Address: **12665 GARDEN GROVE BLVD, STE 108****GARDEN GROVE CA 92843**Date Received & Ref : **01/12/21 01S36897002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41026**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
017428	2	
19GV023UA	1	
020476	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Purchased & Ref : **01/12/21 01S36854002****SHIPPED TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Received & Ref : **01/12/21 01S36854002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41026**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
CCTZWA	1	
020231	2	
CCNWGA	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Purchased & Ref : **01/12/21 01S36854002****SHIPPED TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Received & Ref : **01/12/21 01S36854002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019295**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT,**150/150/200/10MG****NDC: 61958-1901-01**Reference Number: **01I41026**Document Type: **Invoice**Reference Date: **01/12/21**

Lot Number	Quantity	Unique Serial #
020475	1	

(TH) Transaction HistoryManufacturer's Name: **GILEAD SCIENCES, INC**Manufacturer's information: **1800 WHEELER AVENUE LA VERNE,CA 91750****SOLD TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Purchased & Ref : **01/05/21 114524****SHIPPED TO:**Name: **DROGUERIA BETANCES**Address: **LUIS MUNOZ MARIN AVE****CAGUAS PR 00725**Date Received & Ref : **01/05/21 114524****SOLD TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Purchased & Ref : **01/08/21 85339****SHIPPED TO:**Name: **GENTEK LLC**Address: **45 CEDAR ST UNIT 3****STAMFORD CT 06902**Date Received & Ref : **01/08/21 85339****SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/12/21 PO#01211444****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/12/21 RC#016442****SOLD TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Purchased & Ref : **01/12/21 01S36854002****SHIPPED TO:**Name: **VAN WYCK PRESCRIPTION CENTER**Address: **88-20B VAN WYCK EXPRESSWAY****RICHMOND HILL NY 11418**Date Received & Ref : **01/12/21 01S36854002****SOLD TO:**

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019299**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT,

200/25/25 MG

NDC: 61958-2101-01

Reference Number: 01I40999

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
023236	3	
021327	1	
019583	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/12/21 PO#01211444

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/12/21 RC#016442

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/12/21 01S36758002

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/12/21 01S36758002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019299**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT,

200/25/25 MG

NDC: 61958-2101-01

Reference Number: 01140999

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
023779	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/12/21 PO#01211444

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/12/21 RC#016442

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/12/21 01S36758002

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/12/21 01S36758002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019201**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:
VIREAD-TAB-300MG-30/BT,**NDC: 61958-0401-01**

Lot Number	Quantity	Unique Serial #
013184	1	

Reference Number: 01I40928
Document Type: Invoice
Reference Date: 01/11/21

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**
Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211389	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/08/21 RC#016348
SOLD TO: Name: 1746 PHARMACY CORP Address: 524 CLARKSON AVE BROOKLYN NY 11203 Date Purchased & Ref : 01/11/21 01S37231001	SHIPPED TO: Name: 1746 PHARMACY CORP Address: 524 CLARKSON AVE BROOKLYN NY 11203 Date Received & Ref : 01/11/21 01S37231001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
(D) did not knowingly ship a suspect or illegitimate product;
(E) had systems and processes in place to comply with verification requirements under section 582;
(F) did not knowingly provide false transaction information; and
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019201

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: VIREAD-TAB-300MG-30/BT,			Reference Number: <u>01I41378</u> Document Type: <u>Invoice</u> Reference Date: <u>01/19/21</u>											
NDC: 61958-0401-01														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Lot Number</th> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Unique Serial #</th> </tr> </thead> <tbody> <tr> <td>013185</td> <td>1</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Lot Number	Quantity	Unique Serial #	013185	1									
Lot Number	Quantity	Unique Serial #												
013185	1													

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES
Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211389	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/08/21 RC#016348
SOLD TO: Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 01/19/21 01S37673001	SHIPPED TO: Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 01/19/21 01S37673001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140810

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFGA	15	
020731	10	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: GARDEN GROVE COMMUNITY PHARMACY

Address: 12665 GARDEN GROVE BLVD, STE 108

GARDEN GROVE CA 92843

Date Purchased & Ref : 01/08/21 01S36897001

SHIPPED TO:

Name: GARDEN GROVE COMMUNITY PHARMACY

Address: 12665 GARDEN GROVE BLVD, STE 108

GARDEN GROVE CA 92843

Date Received & Ref : 01/08/21 01S36897001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

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(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSDYA	2	
CDMGSA	1	
CDGXKA	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/08/21 01S36758001

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/08/21 01S36758001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

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(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDMGTA	1	
CDMHCA	2	
CDGXFA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/08/21 01S36758001

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Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/08/21 01S36758001

SOLD TO:

Name:

Address:

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SHIPPED TO:

Name:

Address:

Date Received & Ref :

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(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
6400505A	3	
CDGXBA	1	
CCZCFA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/08/21 01S36758001

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/08/21 01S36758001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDGXDA	2	
CDFYHA	1	
CDGWYA	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES, INC**

Manufacturer's information: **1800 WHEELER AVENUE LA VERNE, CA 91750**

SOLD TO:

Name: **DROGUERIA BETANCES**

Address: **LUIS MUNOZ MARIN AVE**

CAGUAS PR 00725

Date Purchased & Ref : **10/05/20 85160**

SHIPPED TO:

Name: **DROGUERIA BETANCES**

Address: **LUIS MUNOZ MARIN AVE**

CAGUAS PR 00725

Date Received & Ref : **10/05/20 85160**

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref : **10/06/20 2719**

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref : **10/06/20 2719**

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/07/21 PO#01211389**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/08/21 RC#016349**

SOLD TO:

Name: **MEDICINE SHOPPE #1802**

Address: **10313 GEORGIA AVENUE #101**

SILVER SPRING MD 20902

Date Purchased & Ref : **01/08/21 01S36758001**

SHIPPED TO:

Name: **MEDICINE SHOPPE #1802**

Address: **10313 GEORGIA AVENUE #101**

SILVER SPRING MD 20902

Date Received & Ref : **01/08/21 01S36758001**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDMGWA	1	
6400501A	2	
CDMHBA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/08/21 01S36758001

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/08/21 01S36758001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40811

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDGWZA	1	
6400506A	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Purchased & Ref : 01/08/21 01S36758001

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101

SILVER SPRING MD 20902

Date Received & Ref : 01/08/21 01S36758001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140814

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFKA	6	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: KINGS SUPER PHARMACY

Address: 357 FLATBUSH AVE

BROOKLYN NY 11238

Date Purchased & Ref : 01/08/21 01S36846001

SHIPPED TO:

Name: KINGS SUPER PHARMACY

Address: 357 FLATBUSH AVE

BROOKLYN NY 11238

Date Received & Ref : 01/08/21 01S36846001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140815

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
020731	4	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: GREENVILLE PHARMACY LLC

Address: 1850 JOHN F KENNEDY BLVD.

JERSEY CITY NJ 07305

Date Purchased & Ref : 01/08/21 01S36903001

SHIPPED TO:

Name: GREENVILLE PHARMACY LLC

Address: 1850 JOHN F KENNEDY BLVD

JERSEY CITY NJ 07305

Date Received & Ref : 01/08/21 01S36903001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140824

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDMGZA	3	
022058	2	
022056	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: NORWOOD PHARMACY

Address: 2490 FREDERICK DOUGLAS BLVD.

NEW YORK NY 10030

Date Purchased & Ref : 01/08/21 01S36762001

SHIPPED TO:

Name: NORWOOD PHARMACY

Address: 2490 FREDERICK DOUGLAS BLVD.

NEW YORK NY 10030

Date Received & Ref : 01/08/21 01S36762001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140824

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFDA	1	
CDSDZA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: NORWOOD PHARMACY

Address: 2490 FREDERICK DOUGLAS BLVD.

NEW YORK NY 10030

Date Purchased & Ref : 01/08/21 01S36762001

SHIPPED TO:

Name: NORWOOD PHARMACY

Address: 2490 FREDERICK DOUGLAS BLVD.

NEW YORK NY 10030

Date Received & Ref : 01/08/21 01S36762001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140825

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CFBGHA	11	
CFBGFA	5	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: ELDER PHARMACY

Address: 1527 WESTCHESTER AVE.

BRONX NY 10472

Date Purchased & Ref : 01/08/21 01S37116001

SHIPPED TO:

Name: ELDER PHARMACY LLC

Address: 1527 WESTCHESTER AVE

BRONX NY 10472

Date Received & Ref : 01/08/21 01S37116001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140826

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDVWGA	11	
020731	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: LEGEND DRUGS 1 LLC

Address: 159 E GUNHILL ROAD

BRONX NY 10467

Date Purchased & Ref : 01/08/21 01S37028001

SHIPPED TO:

Name: LEGEND DRUGS 1 LLC

Address: 159 E GUNHILL ROAD

BRONX NY 10467

Date Received & Ref : 01/08/21 01S37028001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140827

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
020731	4	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: RACHIT DRUG

Address: 233 LYONS AVE.

NEWARK NJ 07112

Date Purchased & Ref : 01/08/21 01S36961001

SHIPPED TO:

Name: RACHIT DRUG

Address: 233 LYONS AVE

NEWARK NJ 07112

Date Received & Ref : 01/08/21 01S36961001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140828

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFKA	4	
020730	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: KINGS SUPER PHARMACY

Address: 357 FLATBUSH AVE

BROOKLYN NY 11238

Date Purchased & Ref : 01/08/21 01S36829002

SHIPPED TO:

Name: KINGS SUPER PHARMACY

Address: 357 FLATBUSH AVE

BROOKLYN NY 11238

Date Received & Ref : 01/08/21 01S36829002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

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(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140830

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFHA	2	
020729	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: CHINO VALLEY PHARMACY

Address: 1932 N STATE ROUTE 89

CHINO VALLEY AZ 86323

Date Purchased & Ref : 01/08/21 01S36797002

SHIPPED TO:

Name: CHINO VALLEY PHARMACY

Address: 1932 N STATE ROUTE 89

CHINO VALLEY AZ 86323

Date Received & Ref : 01/08/21 01S36797002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140831

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDVWGA	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: TOTAL CARE PHARMACY

Address: 4531 THIRD AVENUE

BRONX NY 10458

Date Purchased & Ref : 01/08/21 01S37114001

SHIPPED TO:

Name: TOTAL CARE PHARMACY

Address: 4531 THIRD AVENUE

BRONX NY 10458

Date Received & Ref : 01/08/21 01S37114001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140836

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFKA	1	
CDVWFB	11	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: VAN WYCK PRESCRIPTION CENTER

Address: 88-20B VAN WYCK EXPRESSWAY

RICHMOND HILL NY 11418

Date Purchased & Ref : 01/08/21 01S36854001

SHIPPED TO:

Name: VAN WYCK PRESCRIPTION CENTER

Address: 88-20B VAN WYCK EXPRESSWAY

RICHMOND HILL NY 11418

Date Received & Ref : 01/08/21 01S36854001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

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(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140838

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDVWGA	13	
CFBGFA	6	
CFBGGA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: TOTAL REMEDY & PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased & Ref : 01/08/21 01S37115001

SHIPPED TO:

Name: TOTAL REMEDY & PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received & Ref : 01/08/21 01S37115001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

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(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140838

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
021348	3	
021346	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: TOTAL REMEDY & PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased & Ref : 01/08/21 01S37115001

SHIPPED TO:

Name: TOTAL REMEDY & PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received & Ref : 01/08/21 01S37115001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140839

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDMHDA	3	
CDSFCA	3	
022057	4	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: PILGRIM PHARMACY

Address: 2941 WESTCHESTER AVE

BRONX NY 10461

Date Purchased & Ref : 01/08/21 01S36787002

SHIPPED TO:

Name: PILGRIM PHARMACY

Address: 2941 WESTCHESTER AVE

BRONX NY 10461

Date Received & Ref : 01/08/21 01S36787002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140839

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
022058	1	
CDSFBA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: PILGRIM PHARMACY

Address: 2941 WESTCHESTER AVE

BRONX NY 10461

Date Purchased & Ref : 01/08/21 01S36787002

SHIPPED TO:

Name: PILGRIM PHARMACY

Address: 2941 WESTCHESTER AVE

BRONX NY 10461

Date Received & Ref : 01/08/21 01S36787002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140840

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFGA	2	
CDVWFB	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: LEROY PHARMACY II

Address: 245 EAST 198TH ST

BRONX NY 10458

Date Purchased & Ref : 01/08/21 01S36871002

SHIPPED TO:

Name: LEROY PHARMACY II

Address: 239 EAST 198TH ST

BRONX NY 10458

Date Received & Ref : 01/08/21 01S36871002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140842

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
020728	4	
CDSFHA	2	
020727	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: VLS PHARMACY INC

Address: 4402 5TH AVE

BROOKLYN NY 11220

Date Purchased & Ref : 01/08/21 01S36796001

SHIPPED TO:

Name: VLS PHARMACY

Address: 4402 5TH AVE

BROOKLYN NY 11220

Date Received & Ref : 01/08/21 01S36796001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140844

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
020731	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: ANSONIA PHARMACY

Address: 446 6TH AVENUE

NEW YORK NY 10011

Date Purchased & Ref : 01/08/21 01S36899001

SHIPPED TO:

Name: ANSONIA PHARMACY

Address: 446 6TH AVENUE

NEW YORK NY 10011

Date Received & Ref : 01/08/21 01S36899001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140845

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFFA	2	
020727	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: VALUABLE DRUGS

Address: 417 TARRYTOWN RD

WHITE PLAINS NY 10607

Date Purchased & Ref : 01/08/21 01S36789001

SHIPPED TO:

Name: VALUABLE DRUGS

Address: 417 TARRYTOWN RD

WHITE PLAINS NY 10607

Date Received & Ref : 01/08/21 01S36789001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140846

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
020730	9	
020729	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: ELM DRUGS

Address: 56 7TH AVENUE

NEW YORK NY 10011

Date Purchased & Ref : 01/08/21 01S36818002

SHIPPED TO:

Name: ELM DRUGS

Address: 56 7TH AVENUE

NEW YORK NY 10011

Date Received & Ref : 01/08/21 01S36818002

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140851

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CDSFFA	7	
022055	5	
CDSFBA	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: BROOKLYN CENTER PHARMACY

Address: 104 DEKALB AVENUE

BROOKLYN NY 11201

Date Purchased & Ref : 01/08/21 01S36788001

SHIPPED TO:

Name: BROOKLYN CENTER PHARMACY

Address: 104 DEKALB AVENUE

BROOKLYN NY 11201

Date Received & Ref : 01/08/21 01S36788001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140854

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
023832	1	
025976	1	
023833	2	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: TREE PHARMACY INC

Address: 2423 ADAM CLAYTON POWELL JR BLVD

NEW YORK NY 10030

Date Purchased & Ref : 01/08/21 01S37040001

SHIPPED TO:

Name: TREE PHARMACY INC

Address: 2423 ADAM CLAYTON POWELL JR BLVD

NEW YORK NY 10030

Date Received & Ref : 01/08/21 01S37040001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140863

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CFBGHA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: SAFE MED PHARMACY #2

Address: 6300 SAMUELL BLVD #118

DALLAS TX 75228

Date Purchased & Ref : 01/08/21 01S37123001

SHIPPED TO:

Name: SAFE MED PHARMACY #2

Address: 4245 E BERRY STREET

FORT WORTH TX 76105

Date Received & Ref : 01/08/21 01S37123001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019202**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140864

Document Type: Invoice

Reference Date: 01/08/21

Lot Number	Quantity	Unique Serial #
CFBGHA	3	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES, INC

Manufacturer's information: 1800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Purchased & Ref : 10/05/20 85160

SHIPPED TO:

Name: DROGUERIA BETANCES

Address: LUIS MUNOZ MARIN AVE

CAGUAS PR 00725

Date Received & Ref : 10/05/20 85160

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Purchased & Ref : 10/06/20 2719

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3

STAMFORD CT 06902

Date Received & Ref : 10/06/20 2719

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased & Ref : 01/07/21 PO#01211389

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref : 01/08/21 RC#016349

SOLD TO:

Name: SAFEMED PHARMACY

Address: 6300 SAMUELL BLVD #118

DALLAS TX 75228

Date Purchased & Ref : 01/08/21 01S37122001

SHIPPED TO:

Name: SAFEMED PHARMACY

Address: 6300 SAMUELL BLVD #118

DALLAS TX 75228

Date Received & Ref : 01/08/21 01S37122001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019301

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:
SOVALDI-TAB-400MG-28CT,

NDC: 61958-1501-01

Lot Number	Quantity	Unique Serial #
019503	1	

Reference Number: 01
Document Type: Invoice
Reference Date: 03/31/21

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**
Manufacturer's information: **333 LAKESIDE DRIVE FOSTER CITY,CA 94404**

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016442
SOLD TO: Name: SCS-GILEAD Address: SCS-GILEAD CAMBRIDGE MD 21613 Date Purchased & Ref : 03/31/21 01S41750001	SHIPPED TO: Name: SCS-GILEAD Address: SCS-GILEAD CAMBRIDGE MD 21613 Date Received & Ref : 03/31/21 01S41750001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01140987

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CFBGFA	1	
CDVWFB	2	
020734	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/12/21 PO#01211444**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/12/21 RC#016441**

SOLD TO:

Name: **DRUG MART PHARMACY**

Address: **1249 W. 7TH STREET**

SOUTH PLAINFIELD NJ 07080

Date Purchased & Ref : **01/12/21 01S37226001**

SHIPPED TO:

Name: **DRUG MART PHARMACY**

Address: **1249 W. 7TH STREET**

SOUTH PLAINFIELD NJ 07080

Date Received & Ref : **01/12/21 01S37226001**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40987

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
020733	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: DRUG MART PHARMACY Address: 1249 W. 7TH STREET SOUTH PLAINFIELD NJ 07080 Date Purchased & Ref : 01/12/21 01S37226001	SHIPPED TO: Name: DRUG MART PHARMACY Address: 1249 W. 7TH STREET SOUTH PLAINFIELD NJ 07080 Date Received & Ref : 01/12/21 01S37226001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40991

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CDGWYA	1	
CDMGXA	1	
CDSFFA	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: VLS PHARMACY INC Address: 4402 5TH AVE BROOKLYN NY 11220 Date Purchased & Ref : 01/12/21 01S37131002	SHIPPED TO: Name: VLS PHARMACY Address: 4402 5TH AVE BROOKLYN NY 11220 Date Received & Ref : 01/12/21 01S37131002
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40991

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
022054	1	
6400503A	1	
022055	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/12/21 PO#01211444**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/12/21 RC#016441**

SOLD TO:

Name: **VLS PHARMACY INC**

Address: **4402 5TH AVE**

BROOKLYN NY 11220

Date Purchased & Ref : **01/12/21 01S37131002**

SHIPPED TO:

Name: **VLS PHARMACY**

Address: **4402 5TH AVE**

BROOKLYN NY 11220

Date Received & Ref : **01/12/21 01S37131002**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40991

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
022056	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: VLS PHARMACY INC Address: 4402 5TH AVE BROOKLYN NY 11220 Date Purchased & Ref : 01/12/21 01S37131002	SHIPPED TO: Name: VLS PHARMACY Address: 4402 5TH AVE BROOKLYN NY 11220 Date Received & Ref : 01/12/21 01S37131002
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40993

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CDVWFB	1	
CDVWGA	4	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Purchased & Ref : 01/12/21 01S37160001	SHIPPED TO: Name: FARMACIA APOTEK Address: 753 EAST TREMONT AVE BRONX NY 10457 Date Received & Ref : 01/12/21 01S37160001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40995

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
023774	1	
021348	5	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/12/21 PO#01211444**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/12/21 RC#016441**

SOLD TO:

Name: **RACHIT DRUG**

Address: **233 LYONS AVE.**

NEWARK NJ 07112

Date Purchased & Ref : **01/12/21 01S37233001**

SHIPPED TO:

Name: **RACHIT DRUG**

Address: **233 LYONS AVE**

NEWARK NJ 07112

Date Received & Ref : **01/12/21 01S37233001**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40996

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
025976	1	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: DRUGSMART PHARMACY Address: 300 MAIN STREET KEANSBURG NJ 07734 Date Purchased & Ref : 01/12/21 01S37238001	SHIPPED TO: Name: DRUGSMART PHARMACY Address: 300 MAIN STREET KEANSBURG NJ 07734 Date Received & Ref : 01/12/21 01S37238001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I40998

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CDVWFB	3	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: **GENTEK LLC**

Address: **45 CEDAR ST UNIT 3**

STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: **SAFE CHAIN SOLUTIONS, LLC**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref : **01/12/21 PO#01211444**

SHIPPED TO:

Name: **SAFE CHAIN SOLUTIONS**

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Received & Ref : **01/12/21 RC#016441**

SOLD TO:

Name: **COLE'S VILLAGE PHARMACY**

Address: **223 E 3RD STREET**

CORONA CA 92879

Date Purchased & Ref : **01/12/21 01S37161001**

SHIPPED TO:

Name: **COLE'S VILLAGE PHARMACY**

Address: **223 E 3RD STREET**

CORONA CA 92879

Date Received & Ref : **01/12/21 01S37161001**

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I41013

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
020730	5	
CDSFGA	4	
CDSFKA	5	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:

SOLD TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Purchased & Ref :

SHIPPED TO:

Name: GENTEK LLC

Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

Date Received & Ref :

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Purchased & Ref : 01/12/21 PO#01211444

SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Date Received & Ref : 01/12/21 RC#016441

SOLD TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101
SILVER SPRING MD 20902

Date Purchased & Ref : 01/12/21 01S37159001

SHIPPED TO:

Name: MEDICINE SHOPPE #1802

Address: 10313 GEORGIA AVENUE #101
SILVER SPRING MD 20902

Date Received & Ref : 01/12/21 01S37159001

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

SOLD TO:

Name:

Address:

Date Purchased & Ref :

SHIPPED TO:

Name:

Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I41013

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CDVWGA	1	
020731	3	
020729	2	

(TH) Transaction History

Manufacturer's Name: **GILEAD SCIENCES**

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 01/12/21 01S37159001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 01/12/21 01S37159001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

Drug Supply Chain Security Act Document Doc# 00000019290

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT,

50/200/25 MG

NDC: 61958-2501-01

Reference Number: 01I41013

Document Type: Invoice

Reference Date: 01/12/21

Lot Number	Quantity	Unique Serial #
CDSFBA	3	
020727	1	
CDSFHA	1	

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:

SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref :	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref :
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/12/21 PO#01211444	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/12/21 RC#016441
SOLD TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Purchased & Ref : 01/12/21 01S37159001	SHIPPED TO: Name: MEDICINE SHOPPE #1802 Address: 10313 GEORGIA AVENUE #101 SILVER SPRING MD 20902 Date Received & Ref : 01/12/21 01S37159001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
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- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
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- (G) did not knowingly alter the transaction history.